

Retail Food Establishment Inspection Report

Floyd County Health Department Telephone:812-948-4726

X678

Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24. Indiana Retail Food Establishment Sanitation Requirements.

The time limit for correction of each violation is specified in the narrative portion of this report.

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New Albany Road house Establishment Address (number and street, city, state, zip code)				Telephone Number	Date of Ins (mm/dd/yr	ō ^~ "	
Establishment Address (number and street, city, state, zin code)				(8/2) 98/Jishmin7		18	
170 Owner	<u> 2 Gr</u>	ay	brook In NA 47150	812-844-1218Z	2-13	-19 -176	
Richard Kimes				Purpose: 1. Routine	Follow-up		
Owner's Address				Follow-up 2nd	NO		
Person in Charge				3. Complaint	1	of Violations:	
	R	ic ho	ard Kimes	4. Pre-Operational	c <u>01</u>	NC R 1	
Responsibl	le Person's	E-ma	ail	5. Temporary	<u>. </u>	c (See back of page)	
Certified F	ond Hand	ler		6. HACCP	ł	•	
			Richard Kimes 6-24-20	7. Other (list)	12_	34_/_5	
• CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"							
• VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE BELOW AS "R"							
Beetion#	C/NC	I K	Narrative			To Be Corrected By	
192	<u> </u>	R	Observed as green beans without date marking.	in walk-in		discarded	
		<u> </u>	without date marking.			511 2 3. 040	
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Received by (1	name and t	itle pr	Interdia Ir	nspected by (name and title prin	nted):		
Received by (signature): Thomas Snider, EHS							
Received by (signature): Inspected by (signature):							
				The congulation	Variable (signature):		
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